

**Farmer's Market Food Vendor Evaluation**

Required for vendors offering food products other than raw, uncut, agricultural products at Farmer's Markets in Talbot County

Vendor Name: \_\_\_\_\_

Farm Name (if applicable): \_\_\_\_\_

Address: \_\_\_\_\_

Phone: \_\_\_\_\_ Email Address: \_\_\_\_\_

Food products offered (excluding **raw** agricultural products, honey and fresh herbs):

_____	_____	_____
_____	_____	_____
_____	_____	_____
_____	_____	_____

Market Location: \_\_\_\_\_

Dates of Operation: \_\_\_\_\_ to \_\_\_\_\_

Hours of Operation: \_\_\_\_\_

Do you currently hold a license issued by Department of Health and Mental Hygiene Division of Food or Milk Control?    Yes    No  
(If so, please submit a copy of license)

If offering meats, poultry or eggs, how are you going to maintain proper product temperatures throughout operation period? \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Do you intend on offering samples of your product?    Yes\*    No

\*Please note that if you are going to offer samples of your product, a Seasonal Farmer's Market Sampling License issued by this department is required and a fee may be associated with this license.

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For Health Department Use Only

Comments: \_\_\_\_\_  
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